

## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)  
03269/100M292-US3

In re Application of Kenneth Newman et al.

Application Number  
10/725,246Filed  
December 1, 2003For METHOD OF TREATING ACUTE PAIN WITH IBUPROFEN AND  
OXYCODONE

Art Unit 1944

Examiner Not Yet Assigned

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |                                     |                                  |    |        |
|-------------------------------------|----------------------------------|----|--------|
| <input type="checkbox"/>            | One month (37 CFR 1.17(a)(1))    | \$ |        |
| <input checked="" type="checkbox"/> | Two months (37 CFR 1.17(a)(2))   | \$ | 420.00 |
| <input type="checkbox"/>            | Three months (37 CFR 1.17(a)(3)) | \$ |        |
| <input type="checkbox"/>            | Four months (37 CFR 1.17(a)(4))  | \$ |        |
| <input type="checkbox"/>            | Five months (37 CFR 1.17(a)(5))  | \$ |        |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100

I have enclosed a duplicate copy of this sheet.

- I am the ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ attorney or agent of record. Registration Number 41,151
- ☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

May 28, 2004

Date

(212) 527-7765

Telephone Number

*[Signature]*  
MARIE BRILLAN  
Jay P. Lessler  
44085

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ Total of 1 forms are submitted.

06/07/2004 SDIRETAR 00000096 10725246

02 FC:1252

420.00 OP